PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

09792909-5716

CLAIMS AS FILED - PART I (Column 1)						ımn 2)		SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			9				- -	RATE	FEE]	RATE	FEE
FOR .			NUMBER FILED .		NUME	BER EXTRA	l	BASIC FEE	 	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS					*	υ	ŀ	X\$ 9=		OR	X\$18=	0
INIT	DEPENDENT CL	AIMS	7_ minus 3 =		*	0	ł			Un		
			<u> </u>		L	$\stackrel{}{-}$	ŀ	X43=		OR	X86=	0
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	0
* If	the difference	in column 1 is	ro, enter	"0" in c	column 2	-	TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II										_	OTHER	
		(Column 1)	(Colum			(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**	,	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE		+145=		OR	+290=						
								TOTAL	-	OR	TOTAL	
		(Column 1)	А	DDIT. FEE			addit. Fee					
		CLAIMS		(Colun	IEST	(Column 3)	lr	1	ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT	·	PREVICE PAID I	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NON	Total	*	Minus	**	· .	=		X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										222	
+145=										OR	+290=	
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	:	OR	X\$18=	
\ME	Independent	*	Minus	***		=	╽┟	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								——	Un		
+145= * If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** !	f the "Highest Nur	mber Previously Pa	aid For IN THIS	S SPACE is	s less thai	n 20, enter "20."	AI	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		mber Previously Pa nber Previously Paid					er foun	id in the app	ropriate box	in col	umn 1.	